

Article

Orphans in orphanages of Kashmir “and their Psychological problems”

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The number of orphans is increasing day by day in India in general and in Jammu and Kashmir in particular. Besides, the trend of institutionalizing them is spreading easily in the society, which had its own traditional mechanism of rehabilitation and care/support. This study thus examined the effect of institutionalization on orphans and aimed to find out the psychological impact on orphans. The methodology applied for this study was mixed method design, where qualitative method was used for collecting facts and figures that already exist and quantitative method was used for obtaining new inputs. Interview schedule was used to collect the data from the respondents. The study shows that conflict is the major reason why there was increase in the number of orphans in Kashmir. It also pointed out the fact that most of the orphans face psychological problems and almost all agreed that their adjustment in conventional society will be difficult after they leave the institutions.

Key words: Orphan, psychological problems, conflict, orphanage, poverty, family breakdown.

INTRODUCTION

Orphans exist in every age and in all civilizations. According to the joint report of UNICEF, HIV/AIDS and Development (2002), about 1.7 billion children are orphans worldwide. Out of this number, Asia contributes 6.5% orphans and Africa leads with 11.9% orphans. China have about 573,000 orphans below 28 years old (Orphan report), and an estimated 650,000 children are in Russian orphanages.

Definition of an orphan

A child who is below 18 years of age and who has lost one or both parents may be defined as an orphan (George, 2011). Maternal orphan is referred to a child who has lost their mother and paternal orphan is referred to a child who has lost their father. Social orphans are

children who are living without parents because of abandonment or because their parents gave them up as a result of poverty, alcoholism or imprisonment, etc (Dillon, 2008).

Orphans in India

The number of orphans in India stands at approximately 55 million children of age 0 to 12 years, which is about 47% of the overall population of 150 million orphans in the world (GCM India; UNICEF, 2005). India is the world's largest democracy with a population of over a billion people, of which 400 million are children. Approximately 18 million of this number of children live or work on the streets of India, and majority of them are involved in crime, prostitution, gang related violence and drug trafficking; however, a large number of these children are orphans (Shrivastava, 2007). Orphanages are fully filled with children, and more millions of children are wandering the streets, doing everything they can to

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survive. In India, 158.8 million children are in the age group of 0 to 6 years, though the current overall population of India is 1.21 billion. In Jammu and Kashmir, the past 21 years of conflict has resulted in an alarming increase in the number of orphans. A survey conducted by Jammu and Kashmir Yateem Foundation in 1996 puts the figure at 15,000. In the report of the United Nations General Assembly (2010), it was mentioned that UNICEF (United Nations Children's Fund) estimates that there are about 1 million orphans in Kashmir. A study conducted by Save the Children in December, 2006 mentioned that about 120,000 children are orphans in Jammu and Kashmir in which most of these children are institutionalized. According to a report, titled "Ignored Orphans of Jammu and Kashmir", published in Kashmir Watch under the Human Rights section in its December, 2011 issue, the number of orphans in the state is around 600,000 children. The children who have lost their parents are most vulnerable, because they do not have the emotional and physical maturity to address their psychological trauma associated with parental loss. In the society, orphan children can be considered to be at more risk than average children (Subbarao and Coury, 2004).

Psychological development of a child in the family

The family is one of the main socializing institutions of the society. Within the family, the child appropriates the social norms and values, and becomes capable of having relations with the other members of the society. Culture represents one of the important factors of the personality modelling. The cultural features of a society generate certain distinctive features in the children's socialization. Psychologists agree that children with secure attachments to their parents have better chances to develop into happy, successful, and well-adjusted adults. Parents encourage their children to investigate the world, manipulate objects, and explore physical relationships. This helps children to properly develop physically and emotionally.

Objectives

- 1) To understand the reasons for being an orphan.
- 2) To assess the psychological impact on orphans in institutions.
- 3) To assess orphans' viewpoint regarding their future in a conventional society.

LITERATURE REVIEW

This study takes up a study titled "Experience from Kashmir" conducted by Chan et al. (2006) on psychiatric disorders among children living in orphanages to

examine the problems of children in orphanages. An orphanage for young women in Srinagar was surveyed by psychiatrists using DSM-IV guidelines to evaluate children for psychopathology. Children were in the age group of 5 to 12 years. Post stress traumatic disorder (PTSD) was the commonest psychiatric disorder (40.62%) easily attributable to the prevailing mass trauma state of almost two decades. The next commonest diagnoses were major depressive disorder (MDD) with 25% and conversion disorder with 12.5%. The report says that there is a general agreement among researchers that children placed in special home settings at a young age and for long periods of time are at an increased rate of developing serious psychopathology later in life.

Rutter and Sandberg (1992) were of the opinion that early behavioural disturbance was cited as one of the strongest predictors of later problems, including psychological difficulties, involvement in crime and antisocial behaviour. For most children, the family is the context within which initial relationships and understandings are developed.

Fergusson and Lynskey (1998) mentioned in their study that young people are more likely than adolescence to have higher rates of juvenile offending, substance use and mental health problems later in life.

According to Horton and Mills (1984), the relation between culture and personality is obvious, in that personality formation consists mostly of the internalization of the elements of a culture. In a stable and integrated culture, personality is an individual aspect of culture, and culture is a collective aspect of personality (Cooley, 1918). Parents ensure that their children are satisfied with the physical and affective needs. Deprived of affectivity, the children are abnormally developed and they reach a level of asocial or antisocial behaviour.

Nunokawa (2007) mentioned in his study that people who are living in the institutions labelled raised questions about their identity. The symptoms of care pointed are de-individualization; an individual loses or dwindle the power of his thoughts and action and becomes dependent on the institution. The second symptom mentioned by the author is deculturation, where the individual gets the institutional values and attitudes which differ from his previous culture. The third symptom is the psychological or physical damage, quoting Curtis Committee reports, which recommend that children without parental support should be raised in Foster homes. The author while quoting Lyle points out that handicapped children were better-off with mental fitness when compared with those children without parental support who lived-in institutions.

Shackman and Reynolds (1997) gave a clearer picture of the multidimensional problems which children face in conflict situation. Children of war often show symptoms of severe psychological trauma, sleeping disorders, and problem of their concentration, nightmares, withdrawal, aggression, fear of unexpected souls and movements,

clinging behaviour, depression, inability to form close relation, bed-wetting and so on. These symptoms affect the way they relate to the world around them.

Musisi et al. (2008) in their study did a comparison of the behavioural and emotional disorders among primary school-going orphans and non-orphans in Uganda. They show that emotional, behavioural as well as psychiatric disorders occur in these orphan children. In their study, they recommended that counselling and psychology should be taught to the caretakers and teachers of children living in orphanages, and they clearly pointed out the psycho-socio problems with children who have lost their parents.

A study conducted by Irudayasamy (2006) showed that children who are orphans face many psychological disorders. At the age when they need much support from their parents and siblings to cope up with physical and emotional development, the loss of their parents make them more prone to psychological disorders. The attachment with the siblings and their impact is necessary for a growing child, and missing this link because of orphanages will also add up to their psychological problems.

A study conducted by Sudan (2010) highlighted the problems faced by children who migrated to Kashmir. The basic objective of the study was to understand the socio economic implications of armed conflict on misplaced migrant children and how they got affected under such conditions, to include their experience and understanding. The sample size comprised 230 children below the age of 18 with 160 males and 70 females. It was observed that the marriage of the young women took place early. Lack of educational facilities, peer relations, and psychosocial problems and threats of sexual violence from the local community as well as migrants made these young women vulnerable.

Sengendo and Nambi (2004) in their study found out that adopting parents and schools have not provided the emotional support often needed to these children. Most adopting parents lack information on the problems faced by these children and are therefore unable to offer emotional support; and schoolteachers do not know how to identify psychological and social problems and thus fail to offer individual and group attention. The idea is to show the relation between the environment and the individuals' assessment of their ability to deal with it and to adjust their behavior. Most children without parental support risk powerful cumulative and often negative effects because of their parents' death, thus becoming vulnerable and predisposed to physical and psychological risks.

METHODOLOGY

Research design

Quantitative method was applied in order to obtain a holistic insight into the objectives of this study. This study adopted quantitative

techniques using the survey method. The survey was carried out by using interview schedule which targeted orphan children in institutional care. An interview schedule was administered and the respondents were asked the relevant questions. The questions were asked in simple and easy-to-understand language considering that the respondents were young kids. The answers were immediately marked on the interview schedule. This was done so that no details escape the mind.

Research site

Visits were paid to orphanages and data were collected using interview schedule. The target group/ respondents were orphans, both boys and girls living in different orphanages of Kashmir. The respondents were approached in Chinnar Orphanage Baghat-I-Barzullah, Jammu and Kashmir Yateem Khanah (Chattabal), Gulshan-e-Banaat (Gopalpora), Jammu and Kashmir Yateem Foundation (Jawahir Nagar), and Gulshan Mahal Hostel Bachi Darwaza Makhdoom Sahib. The orphanages selected for sample collection are the orphanages which accommodate around 100 to 350 orphans in their orphanages. 60% of the respondents in this study were males whereas the remaining 40% were females.

A total number of 530 interview schedules were collected from five different orphanages of Kashmir, and the normality test was used to test and ensure that all variables were normally distributed, before the frequency test was carried out, in which 30 respondents were found ineligible as they did not answer many questions; hence, 30 interview schedules were omitted for further tests and only 500 interview schedules qualified for further tests.

Data analysis techniques

The collected interview schedules were verified to ensure that all responses were qualified for conducting this research, and all the unqualified responses were eliminated. The unqualified schedules mostly included the ones with many blank answers. The Statistical Package for Social Sciences program (SPSS) version 16.0 was used for data analysis. First, we tested for normality of the data. Normality test showed that the data were normally distributed. Secondly, descriptive statistics was used to analyze the demographic information of the qualified respondents. Thirdly, cross tabulation was conducted to understand the relation between variables. Later, inferential statistics was used to further analyze the data.

FINDINGS

It was reported that 60% of the respondents were male, while 40% were female (Table 1). 26% of the respondents belong to the age group of 8 to 10 years and 11 to 13 years, 36% belong to the age group of 14 to 16 years, and 12% belong to the age group of 16 years and above. 60% of the respondents were from nuclear families, 33% were from joint families and 2% have no family. 77% of the respondents reported that their mothers are alive, 22% mentioned that none of their parent is alive and 1% mentioned that their fathers are alive. A large percentage of the respondents (54%) mentioned that conflict was the reason for their parents' death, 27% mentioned that long illness was the reason for their parental death, 15% mentioned that accidents were the main cause of their parents' death and just 4% mentioned that the death of

Table 1. Respondents' profile.

Item	Category	Percentage (%)
Gender	Male	60.0
	Female	40.0
Age (Years)	8 - 10	26.0
	11 - 13	26.0
	14 - 16	36.0
	16 and above	12.0
Family type	Nuclear	65.0
	Joint family	33.0
	No family	2.0
Which of your parent is alive	Mother	77.0
	Father	1.0
	None of them	22.0
What was the main cause of your parents' death?	Natural death	4.0
	Due to conflict	54.0
	Due to illness	27.0
	Accidental	15.0
How long have you been in the institution?	1 - 6 Months	3.0
	6 months - 1 year	9.0
	1 - 3 years	7.0
	Above 3 years	81.0
Was there any social change in your family after you lost your parents?	Mother re-married	17
	Uncle preferred nuclearization of family.	18
	Economic struggle	33
	No idea	31
	Father re-married	1

their parents was a natural one. About their living conditions, 81% of the respondents mentioned that they were living in the institution for more than 3 years, 9% mentioned that they were living there for about 6 months to 1 year, 7% said that they had been there from 1 to 3 years, and 3% said that they were there from just 6 months to 1 year. When the respondents were asked about why they were still not adopted, 35% mentioned that because of lack of resources they were not able to adopt them, 24% mentioned that because of their family breakdown they did not adopt them, 21% said because of family conflict they did not adopt them, whereas 20% said that they do not even have uncles. When the respondents were asked about their family state, 33% said that they suffered economically, 31% mentioned that they have no idea, 17% said that their mothers remarried, and 1% said that their fathers remarried.

Table 2 shows that among the male and female

children, the main reason for being an orphan is due to conflict. This fact was revealed by 54.3 and 62.5% of the male and female children respectively. 26.3% of the male children and 22.5% of the female children mentioned that illness was the cause of their being an orphan. However, 18.7% of the male children revealed that accidental deaths of their parents was the cause of their being orphans. To dig deeper and investigate further, Chi-square test was conducted to find the statistical significant difference between males and females with regards to the cause of their being orphans [χ^2 (3)=22.533, $P<0.05$, Cramer's $V=0.212$].

Table 3 shows that 51.3 and 55.0% of the male and female children respectively were willing to join the institution, whereas 32.3 and 42.5% of the male and female children were not willing to join the institution.

However, 16.3 and 2.5% of the male and female children had no idea of whether or not to join the

Table 2. The main cause of parents' death.

Gender		Natural death	Due to conflict	Due to illness	Accidental	Total
Male	Count (% within gender)	5 (1.7)	163 (54.3)	76 (26.3)	56 (18.7)	300 (100.0)
Female	Count (% within gender)	15 (7.5)	125 (62.5)	45 (22.5)	15 (7.5)	200 (100.0)

Table 3. Willingness to join the Institution.

Gender		Yes	No	No Idea	Total
Male	Count (% within gender)	154 (51.3)	97 (32.3)	49 (16.3)	300 (100.0)
Female	Count (% within gender)	110 (55.0)	85 (42.5)	5(2.5)	200 (100.0)

Table 4. Future of the children regarding adjustment of their mindset in conventional society after leaving the Institution.

Gender		Very difficult	Difficult	Average	Normal	Total
Male	Count (% within gender)	77 (25.7)	64 (21.3)	115 (38.3)	44 (14.7)	300 (100.0)
Female	Count (% within gender)	45 (22.5)	105 (52.5)	45 (22.5)	5 (2.5)	200 (100.0)

Table 5. The children experiencing sleep disturbance after they lost their parents.

Gender		Yes	No	No idea	Total
Male	Count (% within gender)	137 (45.7)	156 (52.0)	7 (2.3)	300 (100.0)
Female	Count (% within gender)	145 (72.5)	55 (27.5)	0 (0.0)	200 (100.0)

institution. To investigate further, Chi-square test was conducted to find the statistical significant difference between males and females with regards to joining the institution [$\chi^2 (2)=24.975$, $P<0.05$, Cramer's $V=0.233$].

Table 4 shows that more male children (25.5%) feel that it will be very difficult to adjust in conventional society after leaving the institution than female children (22.5%), whereas more female children (52.5%) feel that it will be difficult to adjust in conventional society after leaving the institution than male children (21.7%). 38.3 and 22.5% of the male and female children mentioned that they feel it will be of average level to adjust in conventional society after leaving the institution. Moreover, 14.7% of the male children and 2.5% of the female children feel that this process will be of normal level. To investigate further, Chi-square test was conducted to find the statistical significant difference between male and female with regards to adjustment in conventional society after leaving the institution [$\chi^2 (3) = 62.506$, $P < 0.05$, Cramer's $V = 0.354$].

Table 5 shows that female children experience more sleep disturbance than male children, as 72.5 and 45.7% of the female and male children respectively mentioned that they experience sleeping disturbance after the lost of

their parents. However, 52.0% of the male children and 27.5% of the female children mentioned that they did not experience sleep disturbance after they lost their parents. The Chi-square test showed statistically significant difference between male and female with regards to experiencing sleep disturbance after the lost of their parents [$\chi^2 (2)=37.055$, $P<0.05$, Cramer's $V=0.272$].

Table 6 shows that majority of the female children (72.5%) felt emotionally weak and started weeping with out any reason in comparison to male children (47.7%), whereas 52.3% of the male children and 27.5% of the female children however mentioned that they did not felt emotionally weak, hence they did not start weeping without any reason. To investigate further, Chi-square test was conducted to find the statistical significant difference between male and female with regards to the children being emotionally weak and started weeping without any reason [$\chi^2 (1)=30.301$, $P<0.05$, Cramer's $V = 0.246$].

Table 7 indicates that female children (60.0%) express their sadness with their peer group more than the male children (53.3%) do. However, 46.7% of the male children and 40.0% of the female children do not express their sadness with their peer group. When further

Table 6. The children feeling emotionally weak and started weeping without any reason.

Gender		Yes	No	Total
Male	Count (% within gender)	143 (47.7)	157 (52.3)	300 (100.0)
Female	Count (% within gender)	145 (72.5)	55 (27.5)	200 (100.0)

Table 7. Expression of sadness with peer group.

Gender		Yes	No	Total
Male	Count (% within gender)	160 (53.3)	140 (46.7)	300 (100.0)
Female	Count (% within gender)	120 (60.0)	80 (40.0)	200 (100.0)

Table 8. The children experiencing shivering after hearing loud voices/sounds.

Gender		Yes	No	Total
Male	Count (% within gender)	143 (47.7)	157 (52.3)	300 (100.0)
Female	Count (% within gender)	120 (60.0)	80 (40.0)	200 (100.0)

Table 9. Recollection of those sad traumatic incidences which happened to the children after they lost their parents.

Gender		Yes	No	Total
Male	Count (% within gender)	240 (80.0)	60 (20.0)	300 (100.0)
Female	Count (% within gender)	150 (75.0)	50 (25.0)	200 (100.0)

investigation was performed using Chi-Square test, it was found that there is no statistically significant difference between male and female children with regards to expressing sadness with peer group [$K^2 (1)=2.165$, $P>0.05$, Cramer's $V=0.066$].

Table 8 shows that female children (60.0%) experience shivering after hearing loud voices or sounds more than male children (47.7%). 52.5 and 40.0% of the male and female children respectively do not experience shivering after hearing loud voices or sounds. To investigate further, Chi-Square test was conducted to find the statistical significant difference between male and female with regards to experiencing shivering after hearing loud voices or sounds [$X^2 (1)=7.321$, $P<0.05$, Cramer's $V=0.121$].

After analyzing Table 9, it shows that 80.0 and 75.0% of both male female children respectively recollected those sad traumatic incidences which happened to them after they lost their parents, while 25.0 and 20.0% of the female and male children respectively mentioned that they do not recollected those sad traumatic incidences which happened to them after they lost their parents. To understand the statistical significant difference, Chi-square test was performed, and it was found that there is

no statistically significant difference between male and female children with regards to recollecting sad traumatic incidences which happened to them after they lost their parents [$X^2 (1) = 1.748$, $p > 0.05$, Cramer's $V = 0.059$].

Table 10 shows that 89.3 and 82.5% of the male and female children, respectively feel that the loss of their parents affected their personality, whereas 17.5 and 6.7% of the female and male children respectively, feel that the loss of their parents did not affect their personality. However 1.7% of the male children mentioned that they cannot express it, and 2.3% mentioned that they have no idea about it. To dig deeper and investigate further, Chi-square test was conducted to find the statistical significant difference between male and female children with regards to loss of their parents and if it affected their personality [$X^2 (3) = 21.450$, $P<0.05$, Cramer's $V=0.207$].

After analyzing Table 11, it was revealed that female children (55.0%) face problems making contact with other people more than male children (44.3%), whereas 55.7 and 42.5% of the male and female children do not face any problems making contact with other people. However, 2.5% of the female children were not able to tell if they could make contacts with other people. To dig

deeper and investigate further, Chi-square test was conducted to find the statistical significant difference between male and female with regards to problems in making contact with other people [$\chi^2 (2)=14.237$, $P<0.05$, Cramer's $V=0.170$].

Table 12 reveals that both female (97.5%) and male (85.7%) children miss their siblings due to institutionalization, whereas 4.7 and 2.5% of the male and female children respectively mentioned that they do not miss their siblings. However, 9.7% of the male children mentioned that they do not have any sibling. To investigate further, Chi-square test was conducted to find the statistical significant difference between male and female children with regards to missing siblings due to institutionalization [$\chi^2 (2)=22.675$, $P<0.05$, Cramer's $V=0.213$].

Table 13 shows that 25.7% of male children and 22.5% of female children feel that their future adjustment in conventional society will be very difficult after leaving the institution. 52.5% of female children and 21.3% of male children also feel that their future adjustment in conventional society will be difficult after leaving the institution. However, 38.3 and 22.5% of male and female children respectively feel that their adjustment in conventional society after leaving the institution will be of an average level, whereas 14.7 and 2.5% of male and female children respectively feel that their adjustment in conventional society after leaving the institution will be of a normal level.

To dig deeper and investigate further, Chi-square test was conducted to find the statistical significant difference between male and female children with regards to future adjustment in conventional society [$\chi^2 (3) = 62.506$, $P<0.05$, Cramer's $V=0.354$].

The analysis of Table 14 reveals that 45.7 and 17.5% of the male and female children respectively felt like leaving the institution, while 54.3 and 82.5% of the male and female children respectively never felt like leaving the institution. To investigate further, Chi-square test was conducted to find the statistical significant difference between male and female children with regards to the feeling of wanting to leave the institution [$\chi^2 (1)=42.188$, $P<0.05$, Cramer's $V=0.2900$].

Table 15 reveals that 90.0% of female children and 71.3% of male children mentioned that they miss their family care because of institutionalization, 10.3% of male children and 2.5% of female children said that they miss their friends, and 10.3% of male children and 2.5% of female children mentioned that they missed freedom due to institutionalization. The table also shows that 8.0% of male children and 5.0% of female children mentioned that they missed relationship bonding.

To dig deeper and investigate further, Chi-square test was conducted to find the statistical significant difference between male and female children with regards to things missed in life because of institutionalization [$\chi^2 (3)=27.348$, $P<0.05$, Cramer's $V=0.234$].

DISCUSSION

This study points out the fact that the traditional support which was provided in Kashmir before the 1990s has lost its roots. It shows that in urban areas, the trend to send orphans to orphanages is low as compared to rural areas. It was discovered that most of these children are from nuclear families which point out that nuclearization which was a part of our society has its impacts engraved already. This study showed that the main reason for being an orphan is the continuous conflict in Kashmir. Same reason was given for being an orphan in the study conducted by Mendelsohn and Straker (1998) in which they mentioned that in the recent past, the casualties of civilians increased dramatically from 5 to 90%. Thus, it implies that in conflict zones, children are at a high risk of losing their parental support. This study showed that most of the respondents felt that it will be difficult for them to adjust in the conventional society after leaving the institution; because of institutionalization, the gap which has been created between them and the socio-cultural aspect of the society plays in their minds. Almost same observation was made by Nunokawa (2007), who opined that those who are living in the institutions labelled, raised questions about their identity. The symptoms of care pointed are de-individualization, where an individual loses or reduces the power of his thoughts and action and is dependent on the institution, and deculturalization, where the individual picks up the institutional values and attitudes which differ from his previous culture. Similar views were given by Tobis (2000) highlighting that children in institutions are likely to face considerable problems in adjusting to life outside the institutions.

Institutionalization of orphans is mainly because of poverty, family break down and family conflict. The same findings were observed in the study of Dasgupta (1986), who mentioned that poverty, family breakdown, etc., are secondary reasons, putting conflict as the main reason for institutionalization of children. The present study shows that there is significant difference between conflict and children being orphans, and significant difference between poverty, family breakdown, family conflict and institutionalization of orphans, though the two studies show similarity but in different contexts.

This study shows that there are many psychological/adjustmental problems with the children living in institutions. The data showed that most of the children suffer from sleeping disturbance, experience shivering after hearing loud voices/sounds, recollect sad traumatic incidences, and almost all of them miss their siblings which point out how significant sibling relation is for the development of a child both physically and psychologically. Most researchers have shown such problems with orphans in institutions. Chamberlain and Weinrott (1990) mentioned in their study that no matter how attractive institutions may seem, they cannot meet the developmental needs of children and youths. Chan Agero

Table 10. Effect of parental loss on children's personality.

Gender		Yes	No	Can't express	No idea	Total
Male	Count (% within gender)	268 (89.3)	20 (6.7)	5 (1.7)	7 (2.3)	300 (100.0)
Female	Count (% within gender)	165 (82.5)	35 (17.5)	0 (0.0)	0 (0.0)	200 (100.0)

Table 11. Problems faced in making contacts with other people.

Gender		Yes	No	Can't express	Total
Male	Count (% within gender)	133 (44.3)	167 (55.7)	0 (0.0)	300 (100.0)
Female	Count (% within gender)	110 (55.0)	85 (42.5)	5 (2.5)	200 (100.0)

Table 12. The children missed their siblings due to institutionalization.

Gender		Yes	No	Don't have siblings	Total
Male	Count (% within gender)	257 (85.7)	14 (4.7)	29 (9.7)	300 (100.0)
Female	Count (% within gender)	195 (97.5)	5 (2.5)	0 (0.0)	200 (100.0)

Table 13. Future of the children regarding adjustment of their mindset in a conventional society after leaving the institution.

Gender		Very difficult	Difficult	Average	Normal	Total
Male	Count (% within gender)	77 (25.7)	64 (21.3)	115 (38.3)	44 (14.7)	300 (100.0)
Female	Count (% within gender)	45 (22.5)	105 (52.5)	45 (22.5)	5 (2.5)	200 (100.0)

Table 14. The children feeling like leaving the institution.

Gender		Yes	No	Total
Male	Count (% within gender)	137 (45.7)	163 (54.3)	300 (100.0)
Female	Count (% within gender)	35 (17.5)	165 (82.5)	200 (100.0)

Table 15. The things the children missed in life because of their institutionalization.

Gender		Family care	Friends	Freedom	Relationship bonding	Total
Male	Count (% within gender)	214 (71.3)	31 (10.3)	31 (10.3)	24 (8.0)	300 (100.0)
Female	Count (% within gender)	180 (90.0)	5 (2.5)	5 (2.5)	10 (5.0)	200 (100.0)

et al. (2006) in their study which focused on children within the age group of 5 to 12 years, opined that PTSD was the commonest psychiatric disorder (40.62%) easily attributable to the prevailing mass trauma state of almost two decades. This was followed by MDD with 25% and conversion disorder with 12.5%. There is a general agreement among researchers that children placed in special home settings at a young age and for long

periods of time are at a greater risk of developing serious psychopathology later in life. Institutional care at an early stage and for a longer period of time can cause a number of problems in children. Many studies conducted on institutional care have revealed that children suffer from psychosocial problems. However, it was noted during the survey of this study that few orphan children were adopted by institutions when they were just 1 to 2 years

old because they were left with no family at all. It is a general agreement that institutionalization of children is not a good step. Because it persistently disturbs the psychological balance of children, studies of this nature have become necessary in such societies where people have been facing conflict for more than two decades. It is important that in such institutions, caretakers and other staff members should get psychological counselling trainings as well as socio-cultural trainings.

Limitations of data collection

In gathering data for this study, the major challenge faced was obtaining permission from the orphanage authorities due to security and other reasons. Also, lack of resources/funds limited the researchers of this study to collect samples from only five orphanages of Kashmir with a total sample of 530.

Conclusion

One of the effects of nuclearization and urbanization is directly on these orphan children. After the death of their parents, they are forced to live their life in institutions, where they miss every emotional attachment like sibling, relatives and social relationship, and importantly they miss the customs, culture, tradition, norms and regulations of the society. They grow up in institutional culture where they do not enjoy these things. In institutions, they are trained as army personnel. They have to eat at a particular time, get up at a fixed time, and work with the institutions norms; it means that in every step they take, interference of the institution is there and they need to obey all the rules and regulations. However, living with a good number of such people who have their stories to tell, this will also have natural impact on the psychological aspect of these children. During the course of this study, we noticed that because of lack of psychologists or psycho-socio caregivers, or case social workers, the children were still living in the traumatic status of their lives.

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